

**Letter of Intent
(to develop a Local Hazard Mitigation Plan)**

County of _____, California

- ☐ **The County does not intend to develop a Local Hazard Mitigation Plan (LHMP), at this time.** [The County understands that it will not be eligible to receive mitigation project funding after November 1, 2004.]

- ☐ **The County intends to develop and submit** for State review and FEMA approval, a ☐ **Single Jurisdiction** or ☐ **Multi-Jurisdictional** Local Hazard Mitigation Plan, **AND:**

☐ The County **has begun** development of a LHMP.

☐ The County **will begin** development of a LHMP by
Date: _____

(If Multi-Jurisdictional; **Name of LEAD Jurisdiction:**_____.)

- ☐ The County does not have enough information to complete this Letter of Intent. Please contact the person listed below to provide clarifications or additional information to the County.

Signed: _____ Date: _____
(Board Chair or Designated Representative)

(Print name & title of signing official) _____

(Please provide the name of the County's contact person in the box below.)

Name LHMP Contact Person: _____

Title: _____

Telephone () _____ - _____

E-mail address: _____

Please complete the enclosed *Letter of Intent* ASAP.
FAX to the OES Hazard Mitigation Section at (916) 845-8385 or 845-8386.